

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2004

Application or Docket Number

09/944623

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	25 minus 20 =	5
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY
TYPE

OTHER THAN
OR SMALL ENTITY

RATE	FEES
BASIC FEE	395.00
X _____	<input type="checkbox"/>
X _____	<input type="checkbox"/>
+ _____	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

RATE	FEES
BASIC FEE	790.00
X 18	90
X 80	80
+ _____	<input type="checkbox"/>
TOTAL	<input type="checkbox"/>

pd.

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	3/10/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	**	=	
Total		Minus	**	=	
Independent		Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>				

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE
X _____	<input type="checkbox"/>
X _____	<input type="checkbox"/>
+ _____	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

RATE	ADDITIONAL FEE
X _____	<input type="checkbox"/>
X _____	<input type="checkbox"/>
+ _____	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

AMENDMENT B	(Column 1)	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	**	=	
Independent		Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>				

RATE	ADDITIONAL FEE
X _____	<input type="checkbox"/>
X _____	<input type="checkbox"/>
+ _____	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

RATE	ADDITIONAL FEE
X _____	<input type="checkbox"/>
X _____	<input type="checkbox"/>
+ _____	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

AMENDMENT C	(Column 1)	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	**	=	
Independent		Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>				

RATE	ADDITIONAL FEE
X _____	<input type="checkbox"/>
X _____	<input type="checkbox"/>
+ _____	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

RATE	ADDITIONAL FEE
X\$ _____	<input type="checkbox"/>
X _____	<input type="checkbox"/>
+ _____	<input type="checkbox"/>
TOTAL ADDIT. FEE	<input type="checkbox"/>

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.